PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSULEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885

INSTRUCTIONS: This appropriate. All further indicated unless correct maintenance fee notifica	form should be used for correspondence including ad below or directed off tions.	or transmitting the ISSU in the Patent, advance of the Patent, advance of the rewise in Block 1, by (a	JE FEE and PUBLICATI rdcrs and notification of n a) specifying a new corres					
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fec(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.				
5514 FITZPATRICE 30 ROCKEFEL NEW YORK, N		Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.						
							(Depositor's name)	
							(Signature)	
							(Date)	
APPLICATION NO.	FILING DATE	FILING DATE			ATTORNEY DOCKET NO. CONFIRMATION		CONFIRMATION NO.	
10/660,585 09/12/2003 Takashi Aizawa 03500.017570 7898 TITLE OF INVENTION: DIGITAL INFORMATION INPUT APPARATUS								
nny y mynn	Chian y Experience	TOSTIE EEE DATE	PUBLICATION FEE DUE	PREV. PAID ISSUE	TERR T	OTAL FEE(S) DUE	DATE DUE	
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	\$300	\$0	TEE I	\$1740	03/28/2008	
nonprovisional EXAM	NO IINER	\$1440 ART UNIT	CLASS-SUBCLASS	₽V		Ψ17-10	03/26/2000	
LE, TUAN H		2622	348-207100	J				
Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON			or agents OR, alternative (2) the name of a single registered attorney or a 2 registered patent attornessed, no name will be	Tup to 3 registered patent attorneys ematively, a single firm (having as a member a ey or agent) and the names of up to thattorneys or agents. If no name is vill be printed.				
PLEASE NOTE: Unificordation as set fort (A) NAME OF ASSIGNATION Canon Kab	less an assignee is ident h in 37 CFR 3.11. Com GNEE ushiki Kaisha	ified below, no assignee oletion of this form is NO	data will appear on the part a substitute for filing and (B) RESIDENCE: (CITY Tokyo, Japa	atent. If an assigned assignment. Y and STATE OR C	OUNTRY	")	cument has been filed for	
Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Gove 4a. The following fee(s) are submitted: Let Issue Fee Let Publication Fee (No small entity discount permitted) Let A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit are overpayment, to Deposit Account Number 66-1205 (enclose an extra copy of this							nown above)	
5. Change in Entity Sta		d above)	overpayment, to Depo					
NOTE: The Issue Fee an interest as shown by the	d Publication Fee (if req records of the United Sta	uired) will not be accepte tes Patent and Trademark	of from anyone other than the postinge.					
Authorized Signature		U	Date February 12, 2008					
Typed or printed name Gary M. Jacobs Registration No. 28,861 This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO)								
an application. Confiden submitting the complete this form and/or suggest: Box 1450, Alexandria, V Alexandria, Virginia 223	tiality is governed by 35 d application form to the ions for reducing this but irginia 22313-1450. DO 113-1450.	U.S.C. 122 and 37 CFR b USPTO. Time will vary rden, should be sent to the NOT SEND FEES OR	on is required to obtain or r 1.14. This collection is ey depending upon the indiv the Chief Information Office COMPLETED FORMS TO expond to a collection of inf	timated to take 12 n ridual case. Any co er, U.S. Patent and ' O THIS ADDRESS	mments to mments or Frademark SEND To	n the amount of time of times. Office, U.S. Depart O: Commissioner for	gathering, preparing, and e you require to complete tment of Commerce, P.O. or Patents, P.O. Box 1450,	

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE